



OPTUM 835 ENROLLMENT REQUEST

Email this form to Optum.ERA@officeally.com or Fax to (360) 896-2151. Once your form is received and processed, Office Ally will email you a confirmation. If you do not receive a confirmation email from us within 2-3 business days or faxing or emailing this form, please send it again. Please make sure to print legibly and to complete this form in its entirety. You risk delaying enrollment if the application is unreadable or incomplete. All fields in **bold** are **required**.

PROVIDER INFORMATION

Provider Name:

Provider Address:

City:

State:

Zip:

PROVIDER IDENTIFIERS INFORMATION

**Provider Federal Tax Identification Number
Employer Identification Number (EIN):**

National Provider Identifier (NPI):

PROVIDER CONTACT INFORMATION

Contact Name:

Telephone Number/Extension:

Email Address:

Fax Number:

SUBMISSION INFORMATION

Reason for Submission:

Authorized Signature:

Note: Electronic Signature (Typed Name) of Person Submitting ERA Enrollment.

NOTE: If you have received ERA's from these payers through another clearinghouse, you may be prompted via email from your previous clearinghouse to confirm the change. If you do not confirm the change, enrollment will be delayed.

This form can be used to enroll for ERAs from any of the following payers. Check all that apply.

| Payer ID | Payer Name | Payer ID | Payer Name |
|-----------------|--|-----------------|--|
| 36273 | AARP (Insured by UnitedHealthcare) | 41161 | OptumHealth Physical (Includes Oxford) |
| 26119 | American Insurance Administrators (AIA) | 65088 | Preferred Care Partners FL |
| 20488 | Better Health Plan of Florida | 45281 | Riverside Health Inc. |
| 87726 | Care Improvement Plus (CIP) / XL Health | 83035 | Senior Whole Health |
| 10629 | Christus Health Medicare Advantage | 76342 | Sierra Health Services / Health Plan of NV |
| 65391 | CBHNP - Health Choice | 76048 | Texas Childrens Health Plan |
| 68063 | Celtic Insurance | 75228 | Texas Childrens Health Plan Medicaid |
| COACC | Colorado Access | 39026 | UMR (formerly Wausau/UHIS) |
| 39113 | Dean Health Plan | 37602 | United HealthOne / Golden Rule |
| PROH1 | Dignity Health - Mercy MG / Woodland | 81400 | United HealthOne / UnitedHealthcare Life Insurance |
| 74284 | Driscoll Childrens Health Plan | 87726 | UnitedHealthcare |
| 31625 | ElderPlan, Inc. | 81400 | UnitedHealthcare / All Savers Insurance |
| 77950 | Health Alliance Medical Plans | 87726 | UnitedHealthcare / MAHP - MD IPA - Optimum - MLH (MAMSI) |
| 62179 | Health Choice Arizona | 03432 | UnitedHealthcare Community Plan / AZ (APIPA) |
| 62180 | Health Choice Generations | 04567 | UnitedHealthcare Community Plan / DE, FL, HI, LA, MA, MD, NC, NM, OH, PA, VA, WA |
| 96475 | Healthlink HMO | 95378 | UnitedHealthcare Community Plan / IA, MS CAN & CHIP, TN |
| 86066 | HMA Hawaii | 96385 | UnitedHealthcare Community Plan / KS |
| 22771 | Managed Health Network (MHN) | 95467 | UnitedHealthcare Community Plan / MI |
| 3135M | Mdwise Healthy Indiana Plan | 86050 | UnitedHealthcare Community Plan / MO |
| 3519M | Mdwise Hoosier Healthwise | UFNEP | UnitedHealthcare Community Plan / NE |
| 94265 | Medica and Medica UHC | 86047 | UnitedHealthcare Community Plan / NJ |
| 78857 | Medica HealthCare Plans / FL | NYU01 | UnitedHealthcare Community Plan / NYU |
| MAHP1 | Medical Associates Health Plan | TEX01 | UnitedHealthcare Community Plan / TX |
| 74323 | Medical Benefits Mutual | WID01 | UnitedHealthcare Community Plan / WI |
| 75190 | NCAS - Fairfax Virginia | 95378 | UnitedHealthcare Plan of the River Valley |
| 87726 | Neighborhood Health Partnership | 00773 | UnitedHealthcare Vision / Spectera |
| 39144 | Network Health Plan of WI | 95959 | UnitedHealthcare West / CA, OK, OR, TX, WA - PacifiCare of AZ, CO, NV |
| 91068 | Northwest Administrators | VACCN | VA Community Care Network |
| 41194 | OptumHealth Complex Medical Conditions (CMC) | 75261 | WebTPA/CHEC |